AMENDMENT TRANSMITTAL LETTER Application No. Filing Date Examiner					Docket No. 291958241US
		Filing Date		Examiner	Art Ur
733,807-Conf. #8859		December 11, 2003		W. T. Leade	er 1742
Applicant(s): Mcl		DEFATURE W	ORKPIECE	PROCESSING TO	OLS WITH
	STRATION SYS		ADDLE REA	CTORS	
Transmitted here					
The fee has been				• •	
The ice has been	n calculated an	·	S AS AMENI		4-44
-	Claims	Highest)_U	
	Remaining After	Number Previously	Number Extra Claims		
Total Claims	Amendment 31	Paid =	Present 0	Rate	0.00
Independent	2	- 4 =	0		0.00
Claims		- 4 -			0.00
Other fee (pleas	se specify):				
Other fee (pleas	se specify):	OR THIS AME	NDMENT:		0.00
	IONAL FEE FO	OR THIS AME	NDMENT:	Small Entity	
TOTAL ADDIT x Large Entity	IONAL FEE FO		,	Small Entity	J
TOTAL ADDIT x Large Entity x No additional	IONAL FEE FO	d for this ame	ndment.		
TOTAL ADDIT x Large Entity x No additional Please char	IONAL FEE FO	d for this ame	ndment.	Small Entity	
TOTAL ADDIT x Large Entity x No additional Please char A duplicate	rional FEE FO ral fee is require	ed for this ame count No. eet is enclosed	ndment. ii		·
TOTAL ADDIT x Large Entity x No additiona Please char A duplicate A check in t	ronal FEE FO ral fee is require rge Deposit Acc copy of this she	od for this ame	ndment. ii I. to cover	n the amount of \$ _	·
TOTAL ADDIT x Large Entity x No additional Please char A duplicate A check in t Payment by x The Directo	ral fee is require rge Deposit Accopy of this she he amount of \$ credit card. For	ed for this ame count No. eet is enclosed orm PTO-2038	ndment. il to cover s is attached. ge and credit	the amount of \$ the filing fee is enc	······································
TOTAL ADDIT X Large Entity X No additional Please char A duplicate A check in t Payment by X The Directo as described	ris hereby auth	count No. Eet is enclosed form PTO-2038 Thorized to charolicate copy of	ndment. il to cover s is attached. ge and credit	the amount of \$ the filing fee is enc	·losed.
TOTAL ADDIT x Large Entity x No additiona Please char A duplicate A check in t Payment by x The Directo as described x Credit a	r is hereby authors overpayment	ed for this ame count No. eet is enclosed form PTO-2038 norized to char olicate copy of	ndment. il. to cover is attached. ge and credit this sheet is e	the amount of \$ the filing fee is end , Deposit Account N	losed.
TOTAL ADDIT X Large Entity X No additional Please chare A duplicate A check in the payment by X The Director as described as descr	al fee is require ge Deposit Accopy of this she he amount of \$ credit card. For is hereby author delow. A dupling overpayment any additional fill	ed for this americount Noeet is enclosed form PTO-2038 norized to charolicate copy of the copy o	ndment. il. to cover is attached. ge and credit this sheet is e	the amount of \$ the filing fee is end , Deposit Account N	······································

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV881813361US, on the date shown below in an envelope addressed to:

MS Amendment, Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313 1450.

Dated: 10127 2000 Signature: (Melody Almberg)